

1907, and the second on Feb. 8th, 1908. Many of the statements are of great interest and usefulness to ourselves.

Great exception has been taken by the *British Medical Journal* and other authorities to the remark in the first circular that it is advisable that the work should be organized under the Medical Officer of Health.

Great progress and greater promise are already shown in Great Britain. It is already proposed to have open air schools (*cf.* France). People are beginning to see that children go to school too young.

The work of medical inspection of schools is well organized and well carried out in New York, Boston, Chicago, and other American cities. Almost any country you can name is doing more than we are doing. The schools on the gold fields of Australia are inspected by the school physician. In Canada it is in successful operation in Halifax and Vancouver, also in Hamilton and Montreal. Montreal voted \$11,000 for this purpose on December 23rd, 1907. We live in Toronto.

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### THE TREATMENT OF ACUTE PNEUMONIA.\*

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**B**Y pneumonia must be understood in this discussion the acute inflammation of the lung excited by the pneumococcus.

A few facts about the pneumococcus have an interesting bearing in relation to the treatment.

The pneumococcus cannot survive long outside the body. An hour or two or less suffices to destroy it, though, in favorable circumstances, *e.g.*, in sputum kept moist and warm, it may live and retain its virulence for a fortnight. If it is so easily destroyed the wonder is where the supply comes from, for it seems to be a ubiquitous germ, and is very often found in a virulent form in the mouth and saliva of healthy persons.

Pneumonia, though a germ disease, is not infectious, that is, it does not spread from the sick to the healthy. Epidemic and house, or room, pneumonia has been described, but for the most part in pre-bacterial days, and much remains to be learnt about it. Our knowledge then of the natural history of the germ and of its mode of propagation is defective.

Pneumonia is said to be increasing in frequency and fatality. Figures seem to prove this in America, but I do not think it true for this country. Cases of pneumonia are at times unusually frequent, as they are just now, but I have always supposed that this was explained by an outbreak of influenza, and for that reason the statistics, I quote in my book, are taken from periods before 1890, when influenza made its appearance here. To

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\* Read at the Harveian Society, London. *Practitioner* (British), April, 1908.